APPLICATION FOR A SCHOOL PLACE DURING THE ACADEMIC YEAR



PLEASE READ THESE NOTES BEFORE COMPLETING THIS FORM

This form should be used by parents/carers requesting transfers between schools during the school year. You must complete a separate application for each school and each child.

All relevant sections of the form **must** be completed as fully as possible or the form will be returned to you.

Applications will be processed in strict date order and a decision will be notified in writing to the applicant.

This form can be made available in Braille or large type upon request.

1. Moving into Somerset 2. Moving within Somerset 3. Moving to work at the H 4. Not moving but wanting 5. Moving out of Somerse	et Hinkley Point site g to change school	Please tick the relevant box PROOF OF ADDRESS SUCH AS EXCHANGE OF CONTRACTS LETTER FROM A SOLICITOR OR A 6 MONTH TENANCY AGREEMENT SIGNED BY YOURSELF AND LANDLORD MAY BE REQUIRED. NOT SENDING THIS INFORMATION MAY RESULT IN AN UNNECESSARY DELAY IN YOUR CHILD BEING OFFERED A SCHOOL PLACE					
Child's Legal Surna	me:	Child's Forena	me(s):				
Date of Birth:		Male / Female	(please circle	e)			
Current Address:	(If applicable)Address moving to:						
Destande	Deta since	Doctor do					
Postcode: Current/Previous School:	Date since	Postcode: Date if moving: If Previous school, last date of					
Address:	_		roll:	3 3011001, last date on			
Part 3 - Preferred School	_						
It will not always be possi you complete application:		your preferred school.	It is therefore	e recommended that			
The earliest you can appl start date.	y for a school place is up	p to six weeks or half a	term in adva	nce of your preferred			
School applying for :				What is your preferred start date?:			

Please note: Local Authority schools will not consider more than one application for the same school within the same academic year unless there has been a significant material change.

Have you previously applied for a place at this school?

YES / NO (please circle)

Part 4 - Supporting Information

Your answers to the following questions are very important and the Admissions Authority will use this information in conjunction with the published over-subscription criteria to help determine whether your child has a priority for a place at your preferred school.

has a priority for a place at your preferred school. 1.								
Has your child previously been in care and is now formally adopted? YES / NO (please c.	ircle)							
Is this application for a child currently in the care of a Local Authority? YES / NO (please of the content of the care of th	circle)							
Name of Social Worker:								
Contact Number:								
If you have answered Yes to either of the questions above, has the Virtual School been consulted a change of school? YES / NO (please								
If not , please ensure you send a copy of this application form to thevirtualschool@somerset.gov.u before submitting this form to the preferred school.	<u>ık</u>							
2.								
Does your child have an Education Health and Care Plan or a Statement of Special Educational Needs (SEN)? YES / NO (pleater)	ase circle)							
If YES please speak to the SEN Casework Team by contacting 0300 123 2224. If your child doe an Education Health and Care Plan or a Statement of Special Educational Needs you do no complete this form.								
If NO , do you believe there are important medical or special needs reasons why a place should be allocated at one of your preferred schools (This does not guarantee a place, but the Admissions Authority may need to consider this information in connection with published over-subscription criteria)	ase circle)							
Does your child have any specific disability of which a school should be aware? YES / NO (pleaser for the place of the pla	ase circle)							
3.								
Does your child hold EEA (European Economic Area) citizenship? YES / NO (please	: circle							
If you have indicated 'No', please attach a copy of your child's immigration documents.								
4.								
Are you involved with the life and worship of a church? YES / NO (please)	se circle)							
If YES please provide details of your Priest/Minister/Leader and explain the relationship on the appropriate 'Faith' Supplementary Information Form.								
Name:								
Address:								
Is your child baptised/christened? YES / NO (please	se circle)							
If YES in which denomination?								
lf you are applying for a place at a Catholic Voluntary Aided School, you will need to supply a copy	6.41							

Please tick if included [

sibling(s) must be resident at the same address. If **YES** please provide details of each sibling(s): Child's Legal Surname: Child's Forename(s): Date of Birth: Male / Female (please circle) School child attends: Child's current Year Child's Legal Surname: Child's Forename(s): Date of Birth: Male / Female (please circle) School child attends: Child's current Year 6. Are either parents/carers members of staff at the preferred school? YES / NO (please circle 7. Fair Access Criteria – please tick if any of the following applies to your child. (Please note that ticking one of the boxes below does not guarantee a place at your preferred school. It will enable the Fair Access Protocol to be invoked should you be unable to secure a school place under the normal in year admission process) a) Children from the criminal justice system or Pupil Referral Unit or alternative provision who need to be reintegrated into mainstream education b) Children who have been out of education for two months or more c) Children of Gypsies, Roma, Travellers, refugees and asylum seekers d) Children who are homeless e) Children / family working with Children's Social Care or Health professional f) Children who are carers g) Children with special educational need, disabilities or medical conditions (but without statement) h) Children known to the police or a number of other agencies i) Children who have to move school because of domestic violence (whether staying in a refuge of with friends/other relatives) j) Children in Year 6 and Year 10 pupils (from summer term) k) Children in Year 11 I) Children of UK Service Personnel m) Any other children who arrive in Somerset outside the normal admissions round who have difficulty securing a place n) Children at risk of permanent exclusion from school o) Children whose behaviour is a cause for concern p) Children with poor attendance of 85% or less in the current or previous academic year Part 5 - Applicant's Details Title: Mr/Ms/Mrs/Miss/Other (please state) Parent/Carer's Surname: Parent/Carer's Forename: Relationship to child: Address (if different from child's): Postcode: Daytime Tel No: Mobile Tel No:

E-mail Address:

5. Will there be any siblings on roll at your preferred school at the time the school place is required? The

YES / NO

Do you have legal Parental Responsibility for

this child? (please circle)

Part 6 - Declaration

I understand that applications must be made by the child's legal parent/carer and that by signing the declaration below I will be confirming my understanding of the information provided on this application form and that the information I have provided is correct. I accept that the Admission Authority reserves the right to withdraw school places which have been obtained by providing incorrect or misleading information.

I understand that it is the parent's responsibility to ensure that the Admission Authority receives the completed application form safely. I note that it is recommended to send my application form by Special Delivery post, or obtain a proof of posting certificate, or a receipt from a County Hall Reception desk if my application is hand delivered. Furthermore, I understand that if my preferred schools include a school in another Local Authority (LA) area, that authority's timescale for providing a decision may be different.

I accept that where parents equally share parental responsibility and two applications are submitted for the same child, the Admission Authority will require the parents to agree which application is to be considered and which should be withdrawn. If parents cannot agree and there is no court order to determine majority responsibility, the preferences indicated by the parent who receives child benefit for the child concerned will be awarded a higher priority than those from the other parent.

I accept that the child's home address must be the place where the child permanently resides for the majority of the time. This would normally be at the same address as the person who has Parental Responsibility for the child and is their main carer. Where the child spends equal amounts of time with both carers, the Admissions Authority will consider the place of residence of the parent/carer who receives Child Benefit to be the child's home. Evidence of parental responsibility will be required should there be doubt and the Admissions Authority may undertake thorough residency checks and reserves the right to request independent confirmation of the child's address.

Notification regarding the processing of any personal data supplied in this form

Data Controller: Somerset County Council

DPO contact - informationgovernance@somerset.gov.uk

Purpose for processing: The information that you give on this form will be used by the Council for the purpose of processing your application for a school place for your child.

Legal basis for processing: For sections 1 to 7: **By law:** The School Admissions Code 2014 which is statutory guidance for Local Authorities states that Local Authorities must provide a common application form that enables parents to express their preference for a place at any state funded school and Schedule 5 of the Deed of Development Consent Obligations relating to Hinkley Point C, Somerset. **Legitimate Interests:** For the prevention and detection of crime (Fraud Act 2006) and to help improve services. For section 8: Consent: we will only share your information with preferred schools if you indicate this, and you can withdraw your consent at any time.

Data Sharing – the personal data provided will be shared with early years settings, health authorities, schools, academies and free schools and may also be shared with other SCC service providers, the Department for Education, Somerset County Councils software supplier and School Appeal Panels. If you are applying for a school outside Somerset it may be shared with other Local Authorities and schools and academies in their area. Data may be shared by schools with a private admissions provider. If you indicate you are moving to work at the Hinkley Point site statistics will be shared with EDF Energy but no personal data will be shared. SCC will not disclose this information to any unauthorised person or body.

Transfers abroad: this data is held within the EU and is accessible by the approved application provider. **Data Retention:** The personal data supplied on this form will be retained for as long as is necessary to meet our statutory requirements and legitimate interests and it will be disposed of in a manner appropriate to its sensitivity. **Your Rights:** You have the right to ask Somerset County Council to a copy of your data, the right to rectify or erase your personal data, and the right to object to processing. However these rights are only applicable if the Council has no other legal obligation concerning that data. You also have the right to complain to the regulator, https://ico.org.uk/ **Consequences:** For sections 1 to 7: If you do not supply this information to us, we will not be able to process your application for a school place for your child.

For more information see www.somerset.gov.uk/privacy

Signature of Parent/Carer/ Guardian:		Date:	
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Part 7 – Submitting your application form

When you are satisfied that you have provided all the relevant information on your application form and any necessary Supplementary Information Form(s) including proof of address, please ensure that you have signed the declaration in Part 6 and then submit your completed application to your preferred school.

Sections 8 and 9

IMPORTANT INFORMATION

The information requested in parts 8 and 9 **will not** be used to make the decision whether or not to offer your child a school place. This information is used solely for the purpose of identifying whether your child meets the criteria for consideration under Fair Access and to assist the new school with planning for your child's admission. You will be neither advantaged nor disadvantaged by completing these sections.

Moving school for whatever reason is a very important decision to make.

The Local Authority would strongly advise you to:

- 1. Discuss the move with your child's current school before taking the decision to transfer your child to another school.
- 2. Visit your all preferred schools before making an application

Part 8 to be completed by parent/carer
Part 9 to be completed by current or previous school

There is no statutory requirement to complete sections 8 and 9 however we would encourage you to consider sharing information about your child.

By signing I understand that any information provided in sections 8 and 9 will be shared with the schools for which I have made a preference.

Please tick the box if you would like the Admission Authority to obtain the information contained in part 9 from your child's current or previous school on your behalf $\ \square$
Print name:
Signature of parent / Guardian:

If completed, please send sections 8 and 9 with your application form to your preferred school.

Not to be used to make a decision as to whether or not a place is offered. This information is to be used for the purposes of assisting the new school with planning for your child's admission.

Part 8 - Additional Information

Reason for leaving Permanently excluded □	Fixed term	n excluded	Other □ (Please provide details)	
Why do you want your child to chusing a separate sheet if required		? (Please give as	s much further information as you can	,
I have discussed my reasons for v	vanting to ch	nange school with	n my child's current school	
Please provide the name of the pe			· ·	
Date of any meetings -				
·	been involve	ed with your child	in the last 3 years? YES / NO (please	e circle
(Please tick all relevant boxes belo	w)	·		
Parent Family Support Advisor (PF	SA) 🗆	Access Liais	son Officer	
Medical tuition team		Educational	Psychologist	
Children's Social Care		Child and A	dolescent Mental Health Service	
Behaviour Support Worker		Physical Imp	pairment Team	
Elective Home Education Team		Traveller Ed	lucation Service	
Safeguarding Children Team		Speech, Lar	nguage and Communication Team,	
Autism Team		Children's A	utism Outreach Team	
Other – (Please specify)				
Is your child attending school regul	•	_	No □	
If your child is not attending regul	arly, please	state why.		

Not to be used to make a decision as to whether or not a place is offered. This information is to be used for the purposes of assisting the new school with planning for your child's admission.

Part 9 - Information for your child's current or previous school to complete

In Year Admissions Additional Information

Please ask an appropriate member of staff at your child's current school, for example the Headteacher or Head of Year to complete and sign this form. Please note there is no statutory requirement to complete this section.

Pupil's name					Date of Birth					
rupii s name Date oi biitti										
Attendance % Period covered										
Additional Needs			l N I					/ "	1.77	- L
School Action	Yes		No		School Action Plus/pupil specific funding				No	
Individual Education Plan or Pastoral Support Plan	Yes	No			EHCP/Statement of SE			of SEN	I Yes	No
Agencies involved –										
N.C. SATS Levels		Maths		English				Science		
KS1										
KS2										
KS3										
CATS Score		Verbal		Non \	erbal Quantitative		itative	e Mean		
Options for Y10/11students										
Student Strengths/Interests/Achievements										
Please indicate based on the	ne stude	nt's las	t progress	report						
Is the student – Academically	, confide	nt	YES	1	2	3	4	5	No	
Stable peer r			YES	1	2	3	4	5	No	
	Well motivated		YES	1	2	3	4	5	No	
Behaviour		(Outstandin	g 1	2	3	4	5	Poor	
Medical history / concerns										
Other relevant information	_l you woul	ld like t	o make th	e rece	ving so	chool av	ware o	of:		
Print name:										

Signature:

Position in school: